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SUBJECT: AMBASSADOR'S ENGAGES VIETNAMESE LEADERSHIP ON HEALTH ISSUES

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¶1. (SBU) Summary: As part of his series of farewell calls on Vietnamese leaders, Ambassador Marine met separately with Deputy Prime Minister (DPM) Truong Vinh Trong and former Minister of Health (MOH) Tran Thi Trung Chien to discuss health issues, particularly HIV/AIDS. Ambassador Marine pushed the Government of Vietnam (GVN) to better coordinate its internal efforts to combat HIV/AIDS, perhaps under the supervision of the office of the DPM, and to work more closely with donors. In both conversations, the Ambassador stressed the need to upgrade prevention efforts, de-stigmatize HIV/AIDS, utilize medicine (methadone) assisted treatment to limit the spread of the disease among intravenous drug users, and bring those living with HIV/AIDS into the policy making process. Vietnam's recently enacted HIV/AIDS legislation represented a good first step, but the GVN now needed to focus on implementation. On avian influenza, Ambassador Marine emphasized the need to continue to share clinical samples. End Summary.

¶2. (SBU) On August 10, Ambassador Marine met separately with Deputy Prime Minister (DPM) Truong Vinh Trong and former Minister of Health (MOH) Tran Thi Trung Chien as farewell calls before departing Hanoi. This was the Ambassador's first time to meet DPM Trong, who was recently re-elected to an additional term in that position. Trong's portfolio includes health issues, and the Ambassador and representatives of other donors had been interested in seeing Trong for some time to discuss coordination in fighting HIV/AIDS. Madame Chien had left her position as Minister of Health earlier the week of the meeting and has been replaced by Nguyen Quoc Trieu.

DEPUTY PRIME MINISTER TRONG ON HIV/AIDS

¶3. (SBU) The Ambassador began his meeting with DPM Trong by telling the DPM that he would like to follow up on an April letter he and UNDP Resident Coordinator John Hendra had sent to the DPM. In that letter, the Ambassador and Hendra urged the GVN to improve its multi-sectoral response to the HIV/AIDS problem in Vietnam, which the Ambassador stated poses a long-term threat to Vietnam's economic health. The "plain truth" is that we are not winning the fight against HIV/AIDS with 100 new HIV/AIDS infections every day in Vietnam, he stressed.

¶4. (SBU) The Ambassador advocated that the Office of Government and

the DPM play a central supervisory and management role that cuts across ministerial lines, and suggested an ongoing dialogue on HIV/AIDS between the donors and the GVN, to include meetings with the DPM and other senior GVN officials. The USG and other donors have made significant contributions to the battle against HIV/AIDS in Vietnam, including USD 65 million from the USG in 2007. However, GVN ministries must find more effective ways to coordinate with one another and with donors in the fight against HIV/AIDS. As HIV/AIDS involves much more than simply health issues, the Ministry of Health (MOH) cannot succeed in fighting HIV/AIDS on its own; other GVN ministries must be involved.

¶15. (SBU) The Ambassador suggested that the National Committee for Drugs, Prostitution and AIDS Prevention and Control could coordinate GVN HIV/AIDS activities, particularly a broader multi-sectoral response that cut across ministerial lines. However, this committee did not meet often enough and had no mechanism for day-to-day operations.

¶16. (SBU) The Ambassador focused on several specific areas that need attention. First, the GVN needed to expand the program of using medicine (methadone) to replace drugs for intravenous drug users, who form a major vector in Vietnam for the spread of HIV/AIDS. The GVN also needed to develop ways to include people living with HIV/AIDS into the policy-making process as these people know the disease and its impact best. The GVN and the donors must create an inclusive and transparent process to develop a set of cost norms for donors and their partners, including NGOs, to be adopted across all areas of health care delivery.

¶17. (SBU) Stigma and discrimination also remain major impediments in the fight against HIV/AIDS. Many Vietnamese continue to associate HIV/AIDS with the "social evils" of drug use and commercial sex work. The resulting stigma causes people to avoid testing and possible help. The Ambassador encouraged high-ranking GVN officials, including the DPM, to publicly demonstrate support for people at risk or living with HIV/AIDS to help them live as fully

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integrated members of society. The law passed by the National Assembly last year was an important first step, but the GVN now must implement this law comprehensively.

¶18. (SBU) DPM Trong responded first by thanking the Ambassador for his participation in many important events in the bilateral relationship during his three year tenure, including successful visits by Prime Minister Phan Van Khai and President Nguyen Minh Triet to the United States and by President Bush and Secretary Rice to Vietnam. "I have two children and many grandchildren living in Ho Chi Minh City and they were happy to welcome President Bush to their city," he said.

¶19. (SBU) DPM Trong stated that he was confident that the friendship and solidarity between the United States and Vietnam would continue to strengthen. The DPM singled out Vietnam's accession to the WTO and the U.S. Congress' granting of Permanent Normal Trade Relations as milestones in the relationship.

¶10. (SBU) As for HIV/AIDS, the DPM praised the significant assistance from the USG to Vietnam, but noted that he shared the Ambassador's concerns on the status of the HIV/AIDS epidemic in Vietnam. Prior to meeting with the Ambassador, the DPM chaired a session that morning strengthening GVN efforts at preventing illegal drugs from entering Vietnam. On August 17, he will host a conference looking at heroin replacement medication. Noting that HIV/AIDS is a pandemic requiring urgent attention, the DPM stated that he would meet with the next U.S. Ambassador to discuss how to coordinate efforts and planned to host a meeting to "exchange experiences" with the donor community.

¶11. (SBU) The Ambassador responded that he would relay the DPM's comments to Ambassador Michalak for follow up.

LAW ENFORCEMENT

¶12. (SBU) The Ambassador concluded the meeting by highlighting the DPM's focus on anti-corruption efforts and improving the rule of law. He then urged the DPM to consider how the USG and GVN could deepen law enforcement cooperation, with a focus on counter-terrorism, anti-money laundering and anti-narcotics efforts.

The DPM stated that he looked forward to discussing these issues with Ambassador Michalak.

MADAME CHIEN'S NEW POSITION

¶13. (SBU) Madame Tran Thi Trung Chien stated that she recently had been selected to chair the "Vietnam HIV/AIDS Prevention Association". This organization consists of members from State agencies and from non-governmental organizations, though it does not yet have a final charter. The organization operates under a delegation of authority from the MOH, which had been tasked by the Prime Minister to create a support fund for Vietnamese HIV/AIDS patients. Madame Chien noted the organization's difficulties in funding for infrastructure and highlighted the need for international assistance.

EVOLVING VIETNAMESE HEALTH CONCERNS

¶14. (SBU) Ambassador Marine noted evolving Vietnamese health concerns as the country modernizes, including the impacts of smoking, pollution, motorbike/auto safety and diet. To counter these rising issues, Vietnam must continue its health sector reforms, particularly the development of relevant regulations and a comprehensive insurance regime.

AVIAN INFLUENZA

¶15. (SBU) Ambassador Marine noted Vietnam's world-class surveillance and early response strategy for human and animal attacks of avian influenza. However, recent events show that the virus has not disappeared and the GVN must maintain its vigilance. (Note: In the past two weeks, Vietnam reported the deaths of two people infected with the H5N1 virus.) As the virus changes, it may become more dangerous. Thus, the prompt sharing of clinical samples remains crucial to leverage U.S. and World Health Organization resources

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--not just of recent cases of H5N1 infection, but also of seasonal influenza. Ambassador Marine urged increased communication and cooperation between animal and health sectors, particularly in pandemic preparation and response.

¶16. (SBU) Madame Chien said that she recently met with Ambassador John Lange, U.S. Special Representative on Avian and Pandemic Influenza, at an APEC Health Ministers' meeting in Sydney and agreed with the importance of sharing samples to develop vaccines.

HIV/AIDS AND PEPFAR

¶17. (SBU) Madame Chien thanked the Ambassador for U.S. support to the Vietnamese health care sector, particularly the PEPFAR program, which she called the "signature symbol" of American assistance. Through cooperation with its U.S. partners, the GVN has improved Vietnamese health and safety capacity toward world standards.

¶18. (SBU) This week, the MOH, Vietnam Administration for AIDS Control (VAAC) approved a plan starting in September to train HIV/AIDS patients to provide care and support for other HIV/AIDS patients. Income from this work will allow the people living with HIV/AIDS to better afford treatment and will increase social integration. Madame Chien also stated that she has been in discussions with VAAC to develop a year-long university based clinical training program for nurses to specialize in HIV/AIDS care and treatment.

¶19. (SBU) Ambassador Marine agreed with Madame Chien's characterization of the U.S.-Vietnam partnership to combat HIV/AIDS.

Turning to the specifics of PEPFAR, Ambassador Marine stated that this year's PEPFAR budget for Vietnam would reach USD 65 million with USD 88 million tentatively budgeted for next year. The Ambassador did not anticipate future increases and noted that both sides now need to focus on how to use these funds most effectively and how to increase cooperation within the GVN, bilaterally and between all donors.

¶20. (SBU) Ambassador Marine underscored the need to involve people living with HIV/AIDS in how to deal with the disease and noted the potential of the health training plan described by Madame Chien. The response to HIV/AIDS must be multi-sectoral, with cooperation among many ministries, as the disease is not simply a health issue.

¶21. (SBU) Ambassador Marine called the new HIV/AIDS law an important landmark in Vietnam's successful response to HIV/AIDS and detailed his recent visit to a clinic in Ho Chi Minh City where lawyers use the new law to provide assistance to HIV/AIDS patients. However, the GVN must ensure the full implementation of the law so its terms are not simply words on paper, he warned.

¶22. (SBU) The Ambassador noted the need to focus on prevention of HIV/AIDS. As the number of new cases climbs, the GVN will be required to provide long-term support to these victims at great expense. Ambassador Marine emphasized the value of medicine assisted treatment for limiting HIV/AIDS among intravenous drug users. The Ambassador noted that he raised the pilot methadone project during his recent meeting with the Prime Minister and urged its expansion to prevent 06 center residents and other drug users from relapsing.

¶23. (SBU) Ambassador Marine stated that testing and counseling were critical for at risk populations and urged the GVN to speed up availability of rapid testing, while improving current testing and counseling procedures.

¶24. (SBU) Finally, the GVN must raise the profile of alcohol abuse as a factor increasing the risk of HIV/AIDS exposure, particularly in the context of other changes in Vietnamese society - an increasingly migratory population, young people engaging in sexual activity prior to marriage - that together raise the chances of contracting HIV/AIDS.

VIETNAMESE HEALTH CARE SECTOR

¶25. (SBU) Madame Chien highlighted the status of the Vietnamese health care sector, noting that during her tenure the MOH focused on four areas; better preventive care, improved health care for the

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poor, children's issues, and increased access to health care for disadvantaged people. According to Madame Chien, 52 million Vietnamese currently have State health insurance to access to basic health services, though the country lags in providing high-tech care.

¶26. (SBU) The MOH is revising the 10 year-old hospital care regulations, which will be sent to the Prime Minister soon for approval. The revisions will create a fund for patient services (but not for health care worker salaries). This fall, the MOH will submit a draft law on health insurance and recently submitted a proposal to upgrade the district health care system. However, while MOH requested 8.3 trillion dong (approximately USD 520 million) for the 2008 budget, the GVN has only approved 300 billion dong (approximately USD 1.9 million) to date. The Prime Minister recently approved a Master Plan on health care system design stretching out to 2020 that will focus on preventive medicine, examination and treatment, human resources, and drug and medical equipment, along with the improvement of local and district health systems, particularly in distant regions.

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